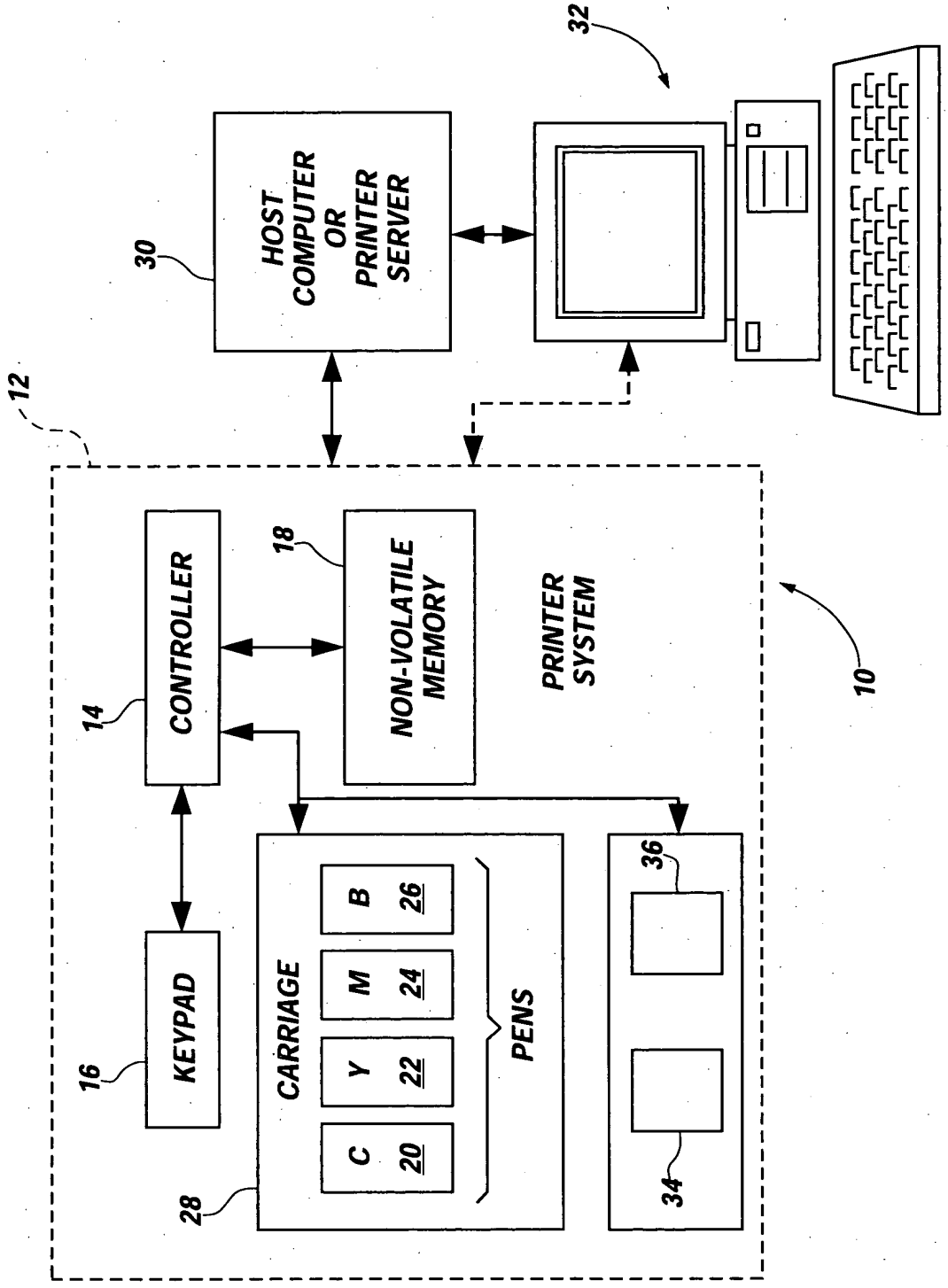

32
HOST COMPUTER OR PRINTER SERVER
30
12
CONTROLLER
14
18
NON-VOLATILE MEMORY
PRINTER SYSTEM
10
KEYPAD
16
CARRIAGE
C 20
Y 22
M 24
B 26
PENS
28
36
34

FIG. 1

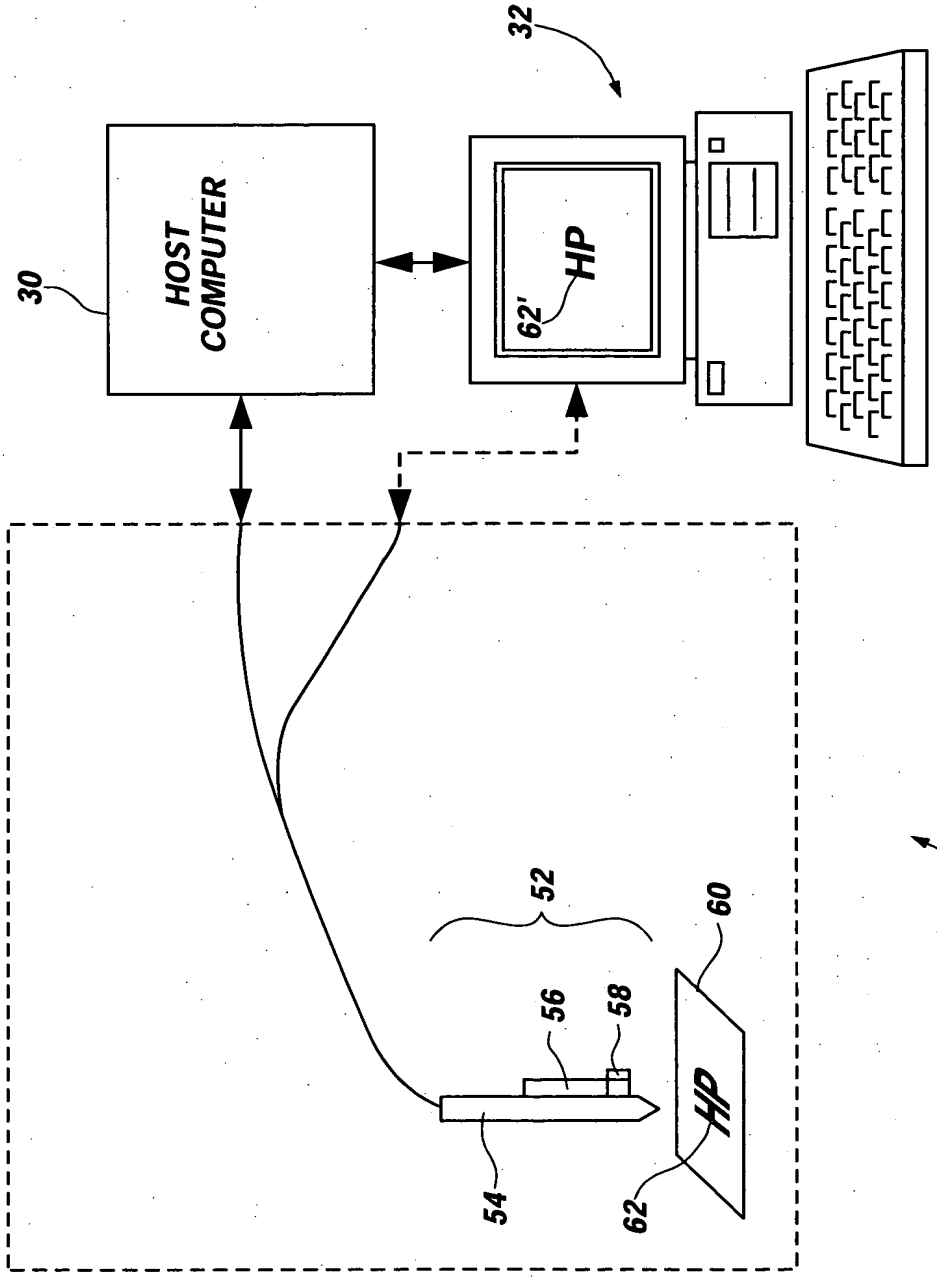
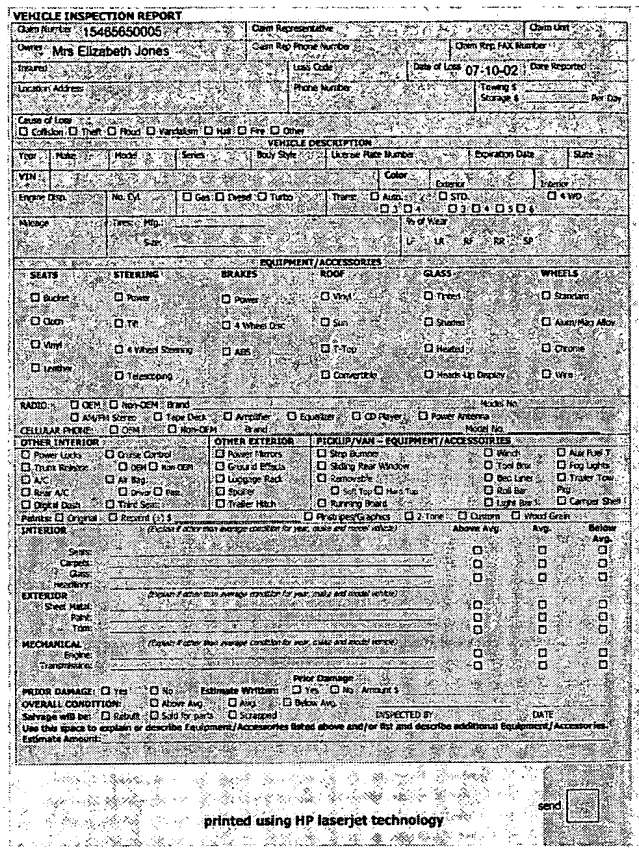


FIG. 2



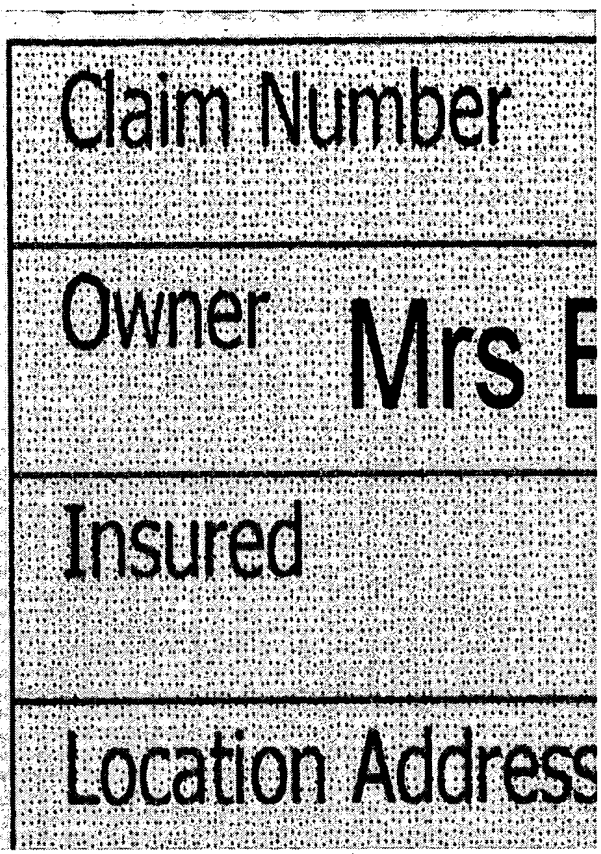
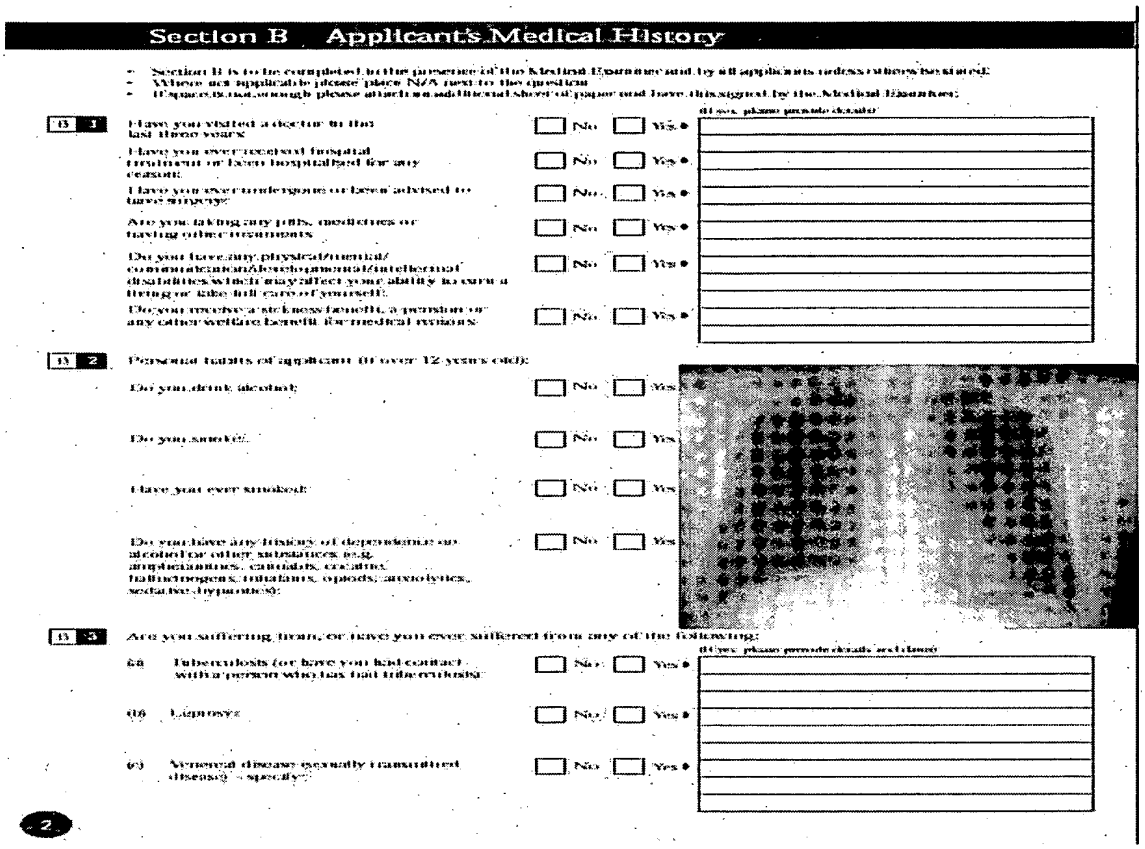


FIG. 3A *FIG. 3B*

FIG. 3C



Section B Applicant's Medical History

- Section B is to be completed in the presence of the Medical Examiner and by all applicants unless otherwise stated.
- Where not applicable please place N/A next to the question.
- If space is not enough please attach an additional sheet of paper and have this signed by the Medical Examiner.

B 1 — (If yes, please provide details)

Have you visited a doctor in the last three years? ☐ No ☐ Yes

Have you ever received hospital treatment or been hospitalised for any reason? ☐ No ☐ Yes

Have you ever undergone or been advised to have surgery? ☐ No ☐ Yes

Are you taking any pills, medicines or having other treatments ☐ No ☐ Yes

Do you have any physical/mental/communication/development/intellectual disabilities which may affect your ability to carry a living or take full care of yourself? ☐ No ☐ Yes

Do you receive a sickness benefit, a pension or any other welfare benefit for medical reasons ☐ No ☐ Yes

B 2 — Personal habits of applicant (if over 12 years old):

Do you drink alcohol? ☐ No ☐ Yes

Do you smoke? ☐ No ☐ Yes

Have you ever smoked? ☐ No ☐ Yes

Do you have any history of dependence on alcohol or other substances (e.g. amphetamines, cannabis, cocaine, hallucinogens, inhalants, opioids, anxiolytics, sedative/hypnotics)? ☐ No ☐ Yes

B 3 — Are you suffering from, or have you ever suffered from any of the following: (If yes, please provide details as follows)

6a Tuberculosis (or have you had contact with a person who has had tuberculosis) ☐ No ☐ Yes

6b Leprosy ☐ No ☐ Yes

6c Venereal disease (sexually transmitted disease) – specify: ☐ No ☐ Yes

2

FIG. 4

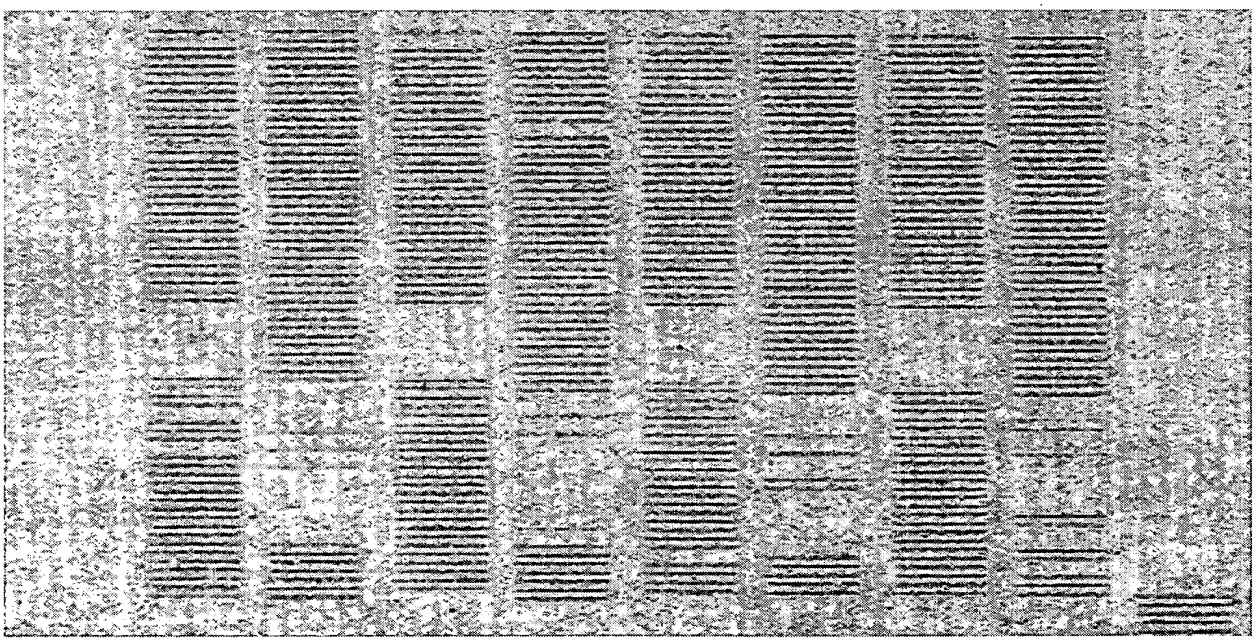


FIG. 5

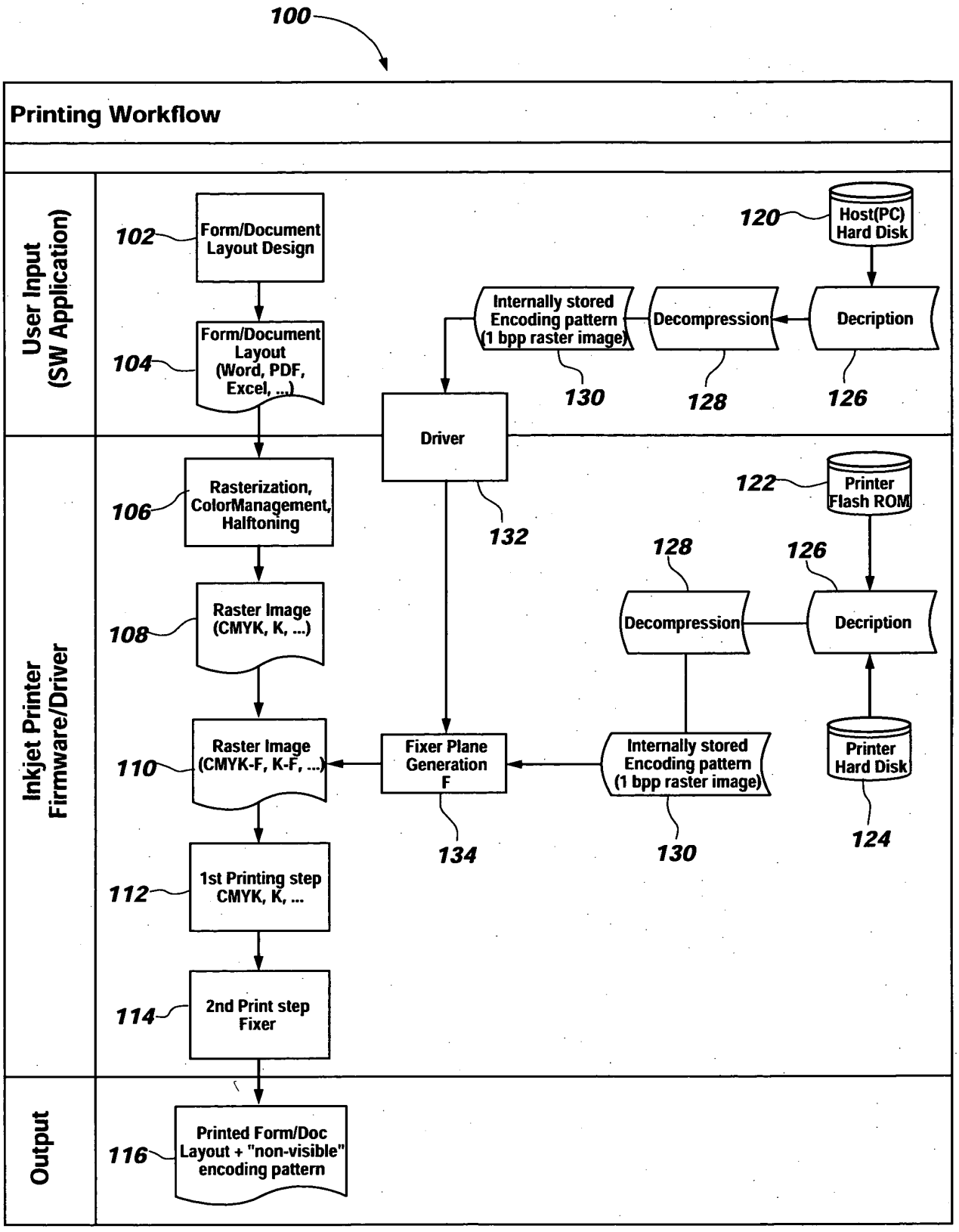

100
Printing Workflow
User Input (SW Application)
Inkjet Printer Firmware/Driver
Output
102
Form/Document Layout Design
104
Form/Document Layout (Word, PDF, Excel, ...)
120
Host(PC) Hard Disk
Internally stored Encoding pattern (1 bpp raster image)
Decompression
Decription
130
128
126
Driver
132
122
Printer Flash ROM
106
Rasterization, ColorManagement, Halftoning
108
Raster Image (CMYK, K, ...)
110
Raster Image (CMYK-F, K-F, ...)
Fixer Plane Generation F
134
Internally stored Encoding pattern (1 bpp raster image)
130
Printer Hard Disk
124
112
1st Printing step CMYK, K, ...
114
2nd Print step Fixer
116
Printed Form/Doc Layout + "non-visible" encoding pattern

FIG. 6